

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
Date Stamp (Received)
JUL 27 2021

Bayfield Co.
Planning and Zoning Agency

ENTERED

Permit #:	21-0267
Date:	8-17-21
Amount Paid:	\$75 8-17-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER						
Owner's Name:		John Robert Henglich		Mailing Address:		9475 Sunnyside Lane		City/State/Zip:		Port Wing, WI 54865		Telephone:		218-464-7662	
Address of Property:		9475 Sunnyside Lane		City/State/Zip:		Port Wing, WI 54865						Cell Phone:			
Contractor:		Self		Contractor Phone:				Plumber:				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone:				Agent Mailing Address (include City/State/Zip):				Written Authorization Attached		<input type="checkbox"/> Yes <input type="checkbox"/> No	
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID#		28590		Recorded Document: (Showing Ownership)		2017R 571254					
1/4, 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Subdivision:															
Section 32		Township 50		N, Range 08		W		Town of:		Port Wing, WI		Lot Size		Acreage 10.0	

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain?	If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage	If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland					

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$39000 20,000 Building	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: HT	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____
				<input checked="" type="checkbox"/> None		

Existing Structure: (if addition, alteration or business is being applied for)	Length: 48'	Width: 40'	Height: 12'
Proposed Construction: (overall dimensions)	Length: _____	Width: _____	Height: _____

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (explain) Pole Barn / Garage	(40 X 48)	1920
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): John Robert Henglich
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 7/21/21

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit 9475 Sunnyside Lane Port Wing, WI 54865
Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

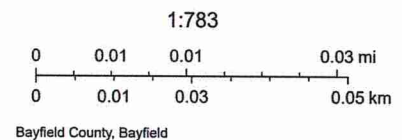
Original Application MUST be submitted

Bayfield County, WI



8/6/2021, 9:15:29 AM

- Wetlands
- Meander Lines
- Approximate Parcel Boundary
- Section Lines
- Municipal Boundary
- All Roads
- Town
- Section Corner Monument on File
- Building Footprint 2009-2015 Existing
- Building Footprint 2009-2015 New
- Driveways
- Buildings



Real Estate Bayfield County Property Listing**Today's Date:** 7/14/2021**Property Status:** Current**Created On:** 3/15/2006 1:15:59 PM**Description**

Updated: 12/21/2017

Tax ID: 28590
PIN: 04-042-2-50-08-33-2 01-000-10000
 Legacy PIN: 042108007000
 Map ID:
 Municipality: (042) TOWN OF PORT WING
 STR: S33 T50N R08W
 Description: E 1/2 E 1/2 NE NW IN DOC 2017R-571254 616
 Recorded Acres: 10.000
 Calculated Acres: 9.756
 Lottery Claims: 0
 First Dollar: Yes
 Zoning: (R-1) Residential-1
 ESN: 127

**Tax Districts**

Updated: 3/15/2006

1	STATE
04	COUNTY
042	TOWN OF PORT WING
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE

**Recorded Documents**

Updated: 3/15/2006

WARRANTY DEED

Date Recorded: 12/19/2017 **2017R-571254**

CONVERSION

Date Recorded: 498865 735-275;916-932

WARRANTY DEED

Date Recorded: 5/3/2005 2005R-498865 916-932

**Ownership**

Updated: 12/21/2017

JOHN ROBERT HAUGLID

ESKO MN

Billing Address:

JOHN ROBERT HAUGLID
 299 E HAFNEY RD
 ESKO MN 55733

Mailing Address:

JOHN ROBERT HAUGLID
 299 E HAFNEY RD
 ESKO MN 55733

**Site Address** * indicates Private Road

9475 SUNNYSIDE LN PORT WING 54865

**Property Assessment**

Updated: 5/29/2014

2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	2.000	8,100	74,100
G6-PRODUCTIVE FOREST	8.000	10,400	0

2-Year Comparison

	2020	2021	Change
Land:	18,500	18,500	0.0%
Improved:	74,100	74,100	0.0%
Total:	92,600	92,600	0.0%

**Property History**

N/A

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0267** Issued To: **John Hauglid**

E ½ of the E ½ of
Location: **NE ¼ of NW ¼** Section **33** Township **50** N. Range **8** W. Town of **Port Wing**

Gov't Lot Lot Block Subdivision CSM#

For: **Residential Accessory Structure: [1- Story; Pole Barn (40' x 48') = 1,920 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation / sleeping purposes. No pressurized water or plumbing allowed inside structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

August 17, 2021

Date